

# Lincoln-Sudbury Regional High School

## Career Exploration Internship Program Contract

The career exploration program allows students of all grade levels to explore a potential career, to practice work skills, to learn how business organizations function, or to make a contribution to their community.

Individual proposals will be evaluated by an internship coordinator. Credit will be based on hours of participation and successful evaluation of the student's work experience.

The internship coordinator will maintain regular contact with the internship supervisor throughout the semester in an effort to facilitate a successful experience for all parties involved.

Students will be asked to maintain a weekly journal during their internship and will write a final essay reflecting on their overall experience.

Date: \_\_\_\_\_

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
House

\_\_\_\_\_  
Counselor

### STUDENT PROPOSAL:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Name of Supervisor/Sponsor

\_\_\_\_\_  
Address of Workplace

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

### The following signatures indicate approval for the student's participation in the program.

\_\_\_\_\_  
Supervisor Sponsor

\_\_\_\_\_  
Parent

\_\_\_\_\_  
Student

\_\_\_\_\_  
Housemaster

\_\_\_\_\_ will earn \_\_\_\_\_ credits for his/hers participation in this Internship. The high school coordinator will be \_\_\_\_\_. Please call this person at extension \_\_\_\_\_ with any questions or issues.

**Credit will be based on hours of participation and successful evaluation of the work experience.**

## SCHEDULE CHANGE APPLICATION FORM

Date: \_\_\_\_\_

Name: \_\_\_\_\_ House/Year: \_\_\_\_\_ Counselor: \_\_\_\_\_

SCHEDULE CHANGE REQUEST: This information is only required if you are requesting to drop a course in order to participate in the Career Exploration Internship Program.

Course to be dropped: \_\_\_\_\_ Block: \_\_\_\_\_

Teacher: \_\_\_\_\_

Signatures required below acknowledge the request to drop a class.

Teacher: \_\_\_\_\_

Counselor Signature: \_\_\_\_\_

Department Coordinator: \_\_\_\_\_

Parent Signature: \_\_\_\_\_